Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
DISTRICT OF NEW HAMPSHIRE		
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	 Check if this an amended filing

#### Official Form 101

## **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself						
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
1.	Your full name					
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.	Dawn First name  H. Middle name  Nelson Last name and Suffix (Sr., Jr., II, III)	First name  Middle name  Last name and Suffix (Sr., Jr., II, III)			
2.	All other names you have used in the last 8 years Include your married or maiden names.	Dawn Helena Nelson				
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-2667				

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Debtor 1 Dawn H. Nelson Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names		I have not used any business name or EINs.  Business name(s)	☐ I have not used any business name or EINs.  Business name(s)		
		LINS	LINS		
5.	Where you live	32 Berry St.	If Debtor 2 lives at a different address:		
		Derry, NH 03038  Number, Street, City, State & ZIP Code  Rockingham	Number, Street, City, State & ZIP Code  County		
		County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for bankruptcy	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)		

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Case number (if known)

Par	t 2: Tell the Court About	our Bank	ruptcy Ca	ase					
7.	The chapter of the Bankruptcy Code you are			orief description of each, see a			or Individuals Filing	g for Bankruptcy	
	choosing to file under	☐ Chap	ter 7						
		☐ Chap	ter 11						
		☐ Chap	ter 12						
		■ Chap	ter 13						
8.	How you will pay the fee	abo	out how yo der. If your	y the entire fee when I file my petition. Please check with the clerk's office in your local court for more details by you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with inted address.					
				to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay					
		☐ I re	equest that t is not req	ling Fee in Installments (Official Form 103A).  Lest that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that is to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out					
				on to Have the Chapter 7 Filin					
9.	Have you filed for	■ No.							
	bankruptcy within the last 8 years?	☐ Yes.							
	•		District		When	Case	number		
			District		When	Case	number		
			District		When	Case	number		
10.	Are any bankruptcy	■ No							
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.							
			Debtor			Relatio	enship to you		
			District		When	Case n	number, if known		
			Debtor				onship to you		
			District		When	Case n	number, if known		
11.	Do you rent your residence?	■ No.	Go to	line 12.					
		☐ Yes.	Has yo	our landlord obtained an evicti	on judgment aga	ainst you and do you wa	ant to stay in your r	esidence?	
				No. Go to line 12.					
				Yes. Fill out <i>Initial Statemen</i> bankruptcy petition.	t About an Evicti	on Judgment Against Y	<i>ou</i> (Form 101A) an	d file it with this	

Debtor 1 Dawn H. Nelson

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Deb	tor 1 Dawn H. Nelson				Case number (if known)			
Par	13: Report About Any Bu	einassas	You Own	as a Sole Pronrie	tor			
		1011100000	100 0 1111					
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to F	Part 4.				
		☐ Yes.	Name	and location of bus	siness			
	A sole proprietorship is a							
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			of business, if any				
	If you have more than one sole proprietorship, use a		Numbe	Number, Street, City, State & ZIP Code				
	separate sheet and attach it to this petition.		Check	the appropriate bo	ox to describe your business:			
	·				ness (as defined in 11 U.S.C. § 101(27A))			
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))			
				Stockbroker (as d	efined in 11 U.S.C. § 101(53A))			
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))			
				None of the above	e			
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?  For a definition of small business debtor, see 11 U.S.C. § 101(51D).	deadline: operation	e filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate as. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of ans, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure S.C. 1116(1)(B).  I am not filing under Chapter 11.  I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.  I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.					
Par	•	Have Any	Hazardou	is Property or An	y Property That Needs Immediate Attention			
14.	Do you own or have any property that poses or is	No.						
	alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is th	ne hazard?				
	public health or safety? Or do you own any property that needs immediate attention?			ate attention is why is it needed?				
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	the property?				
	-				Number, Street, City, State & Zip Code			

Debtor 1 Dawn H. Nelson

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Det	otor 1 Dawn H. Nelson			Case num	ber (if known)				
Par	t 6: Answer These Quest	ions for R	eporting Purposes						
16.	What kind of debts do you have?	16a.	16a. <b>Are your debts primarily consumer debts?</b> Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred individual primarily for a personal, family, or household purpose."						
			☐ No. Go to line 16b.						
			■ Yes. Go to line 17.						
		16b.	b. <b>Are your debts primarily business debts?</b> Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.						
			□ No. Go to line 16c.						
			☐ Yes. Go to line 17.						
		16c.	State the type of debts you	u owe that are not consumer debts or busin	ess debts				
17.	Are you filing under Chapter 7?	■ No.	I am not filing under Chap	ter 7. Go to line 18.					
	Do you estimate that after any exempt property is excluded and	☐ Yes.		I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?					
	administrative expenses		□ No						
	are paid that funds will be available for		☐ Yes						
	distribution to unsecured creditors?								
18.	How many Creditors do	<b>■</b> 1-49		□ 1,000-5,000	□ 25,001-50,000				
	you estimate that you owe?	☐ 50-99		<b>5001-10,000</b>	<b>5</b> 0,001-100,000				
		<u> </u>		☐ 10,001-25,000	☐ More than100,000				
		□ 200-9	99						
19.	How much do you estimate your assets to be worth?	□ \$0 - \$	'	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion				
			01 - \$100,000	☐ \$10,000,001 - \$50 million☐ \$50,000,001 - \$100 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion				
			001 - \$500,000 001 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion				
20.	How much do you	□ \$0 - \$	50,000	☐ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion				
	estimate your liabilities to be?		001 - \$100,000	□ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion				
			001 - \$500,000	□ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion				
		<b>□</b> \$500,	001 - \$1 million	<b>—</b> \$100,000,001 - \$300 million	- Wore than \$50 billion				
Par	t 7: Sign Below								
For	you	I have ex	amined this petition, and I of	declare under penalty of perjury that the info	ormation provided is true and correct.				
				er 7, I am aware that I may proceed, if eligib e relief available under each chapter, and I	le, under Chapter 7, 11,12, or 13 of title 11, choose to proceed under Chapter 7.				
If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me to document, I have obtained and read the notice required by 11 U.S.C. § 342(b).					not an attorney to help me fill out this				
		I request	relief in accordance with th	e chapter of title 11, United States Code, sp	pecified in this petition.				
	I understand making a false statement, concealing property, or obtaining money or property by fraud in connection bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1 and 3571.  /s/ Dawn H. Nelson								
		Dawn H	I. Nelson e of Debtor 1	Signature of Deb	otor 2				
		Executed	on April 4, 2017	Executed on					
			MM / DD / YYYY	N	MM / DD / YYYY				

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Debtor 1	Dawn H. Nelson	Case number (if known)			

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Christopher J. Garner Signature of Attorney for Debtor	Date	April 4, 2017 MM / DD / YYYY
digitatore of Attorney for Bestor		WINT DD / TTTT
Christopher J. Garner		
Printed name		
Garner Law Office		
Firm name		
7 Auburn Street		
Nashua, NH 03064		
Number, Street, City, State & ZIP Code		
Contact phone 603 882-8008	Email address	ecf@attorneygarner.com
BNH01225		
Bar number & State		<del>_</del>

-:-	lin Abin inform					
		nation to identify you	case:			
De	ebtor 1	Dawn H. Nelson First Name	Middle Name	Last Name		
	ebtor 2					
(Sp	ouse if, filing)	First Name	Middle Name	Last Name		
Un	nited States Ba	nkruptcy Court for the:	DISTRICT OF NEW HAI	MPSHIRE		
1	ase number _					Check if this is an amended filing
St	as complete a	of Financial	ble. If two married people	duals Filing for B are filing together, both are	equally responsible for sup	
		n). Answer every ques	stion. rital Status and Where Yo	u Lived Refore		
1.		r current marital statu		u Liveu Deloie		
	☐ Married ■ Not mai					
2.	During the la	ast 3 vears, have vou	lived anywhere other than	where you live now?		
	□ No		·	not include where you live now	<i>ı</i> .	
	Debtor 1 Pr	rior Address:	Dates Debtor 1	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
	32 Berry S Derry, NH		From-To: since 1967	☐ Same as Debtor	ı	☐ Same as Debtor 1 From-To:
	No Yes. Ma	ies include Arizona, Ca	lifornia, Idaho, Louisiana, Ne	egal equivalent in a commun evada, New Mexico, Puerto R Official Form 106H).		
Pa		in the Sources of You				
4.	Fill in the tota	al amount of income yo	u received from all jobs and	ng a business during this ye all businesses, including part- ve together, list it only once ur	time activities.	ndar years?
	■ No □ Ves Fil	I in the details.				
	ies. r⊪	i iii tiie uetalis.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)

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Case number (if known)

5.	5. Did you receive any other income during this year or the two previous calendar years?  Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lotted winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.									
	List each	n source an	d the gross inco	me from eac	ch source separa	ately. Do r	not include income	that you listed in li	ne 4.	
	□ No		-			-				
		s. Fill in the	dotaile							
	- res	s. FIII III IIIE	uetalis.							
				Debtor 1				Debtor 2		
				Sources of Describe by		each	s income from source e deductions and sions)	Sources of inc Describe below		Gross income (before deductions and exclusions)
			rent year until ankruptcy:	SSI Bene	fits		\$2,440.00			
				SSI Disak Benefits	oility		\$572.00			
		endar year: o Decembe	er 31, 2016 )	SSI Bene	fits		\$7,320.00			
				SSI Disab Benefits	oility		\$1,716.00			
			pefore that: er 31, 2015 )	SSI Bene	fits		\$7,320.00			
				SSI Disak Benefits	oility		\$1,716.00			
Pa	rt 3: Li	st Certain	Payments You	Made Befor	re You Filed for	Bankrup	tcy			
6.	Are eith ☐ No.	Neither	Debtor 1 nor D	ebtor 2 has	marily consume primarily cons mily, or househo	umer del	ots. Consumer deb	ots are defined in 11	1 U.S.C. § 10′	1(8) as "incurred by an
				•	for bankruptcy, c	lid you pa	y any creditor a tot	al of \$6,425* or mo	ore?	
		□ <sub>No.</sub> □ <sub>Voc</sub>		-	to whom you no	nid a total	of \$6 125* or more	in one or more pa	umants and th	ne total amount you
		— 16s	paid that cre	editor. Do no	ot include payme an attorney for	nts for do	mestic support obli	gations, such as cl	hild support a	nd alimony. Also, do
		* Subje					uptcy case. at for cases filed or	n or after the date of	of adjustment.	
	Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts.  During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?									
		■ No.	Go to line 7	·.						
	Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.									
	Credito	r's Name a	nd Address		Dates of payme	ent	Total amount	Amount you	Was this p	ayment for
							paid	still owe		

Debtor 1 Dawn H. Nelson

Case: 17-10488-BAH Doc #: 1 Filed: 04/04/17 Desc: Main Document Page 10 of 55 Debtor 1 Case number (if known) Dawn H. Nelson Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider. **Insider's Name and Address** Reason for this payment Dates of payment **Total amount** Amount you still owe paid Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider Amount you **Insider's Name and Address** Dates of payment **Total amount** Reason for this payment still owe Include creditor's name paid Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. Nο П Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address** Describe the Property Date Value of the property Explain what happened 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Nο Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Value Dates you gave per person the gifts

Address:

Person to Whom You Gave the Gift and

Debtor 1 Case number (if known) Dawn H. Nelson 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Nο Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value contributed more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Yes. Fill in the details. Person Who Was Paid Description and value of any property Amount of Date payment Address transferred or transfer was payment **Email or website address** made Person Who Made the Payment, if Not You Cash receipt of \$2,500.00 to process an Christopher J. GArner, Esq. April 4, 2017 \$2,500.00 7 Auburn St. emergency chapter 13 bankruptcy Nashua, NH 03064 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. Nο Yes. Fill in the details. **Person Who Was Paid** Description and value of any property Date payment Amount of Address transferred or transfer was payment made Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details. **Person Who Received Transfer** Description and value of Describe any property or Date transfer was payments received or debts **Address** property transferred made paid in exchange Person's relationship to you

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Debtor 1 Dawn H. Nelson Case number (if known)

19.	beneficiary? (These are often called asset-prote		o a sen-settled trust or similar devic	e of which you are a					
	☐ Yes. Fill in the details.								
	Name of trust	Description and value of the	property transferred	Date Transfer was made					
Pai	rt 8: List of Certain Financial Accounts, Instr	ruments, Safe Deposit Boxes, and	l Storage Units						
. Ci	List of Octum I manoral Accounts, moti	unionio, ouro poposit poxes, uno	otorage omes						
20.	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associa	other financial accounts; certifica	ites of deposit; shares in banks, cred						
	No Yes. Fill in the details.								
	Name of Financial Institution and L	ast 4 digits of Type of account number instrumen	t closed, sold, moved, or	Last balance before closing or transfer					
21.	Do you now have, or did you have within 1 yearsh, or other valuables?	ar before you filed for bankruptcy	transferred r, any safe deposit box or other depo	ository for securities,					
	No								
	Yes. Fill in the details.	What also had account 200	Describe the contents	D					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?					
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?								
	■ No □ Yes. Fill in the details.								
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?					
Pai	rt 9: Identify Property You Hold or Control fo	or Someone Else							
23.	Do you hold or control any property that some for someone.	eone else owns? Include any pro	perty you borrowed from, are storing	ງ for, or hold in trust					
	■ No								
	Yes. Fill in the details.								
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value					
Pai	rt 10: Give Details About Environmental Inform	mation							
	the purpose of Part 10, the following definition								
Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazard toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or									
	regulations controlling the cleanup of these s  Site means any location, facility, or property a to own, operate, or utilize it, including disposa	s defined under any environment	al law, whether you now own, opera	ate, or utilize it or used					
	Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.								

Official Form 107

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

Debtor 1 Dawn H. Nelson Case number (if known)

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?  No								
	_	s. Fill in the details.						
	Name of Address	of site S (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	d	Environmental law, if you know it	Date of notice		
25.	Have yo	u notified any governmental unit of	any release of hazardous material?					
	■ No □ Yes	s. Fill in the details.						
	Name of Address	of site S (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	d	Environmental law, if you know it	Date of notice		
26.	Have yo	u been a party in any judicial or adm	ninistrative proceeding under any envi	ron	mental law? Include settlements a	nd orders.		
	■ No □ Yes	s. Fill in the details.						
	Case T Case N		Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ture of the case	Status of the case		
Par	t 11: G	ive Details About Your Business or 0	Connections to Any Business					
27.	Within 4	years before you filed for bankrupt	cy, did you own a business or have an	y of	f the following connections to any	business?		
		A sole proprietor or self-employed in	n a trade, profession, or other activity,	eith	ner full-time or part-time			
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)							
		A partner in a partnership						
		An officer, director, or managing exe	ecutive of a corporation					
		An owner of at least 5% of the voting	g or equity securities of a corporation					
	■ No	None of the above applies. Go to P	Part 12.					
	☐ Yes	s. Check all that apply above and fill	in the details below for each business	<b>S</b> .				
	Busine Addres	ss Name	Describe the nature of the business		Employer Identification number Do not include Social Security r	umber er ITIN		
		Street, City, State and ZIP Code)	Name of accountant or bookkeeper		Dates business existed	idilibei oi iiin.		
28.		lyears before you filed for bankruptons, creditors, or other parties.	cy, did you give a financial statement t	to ai	nyone about your business? Inclu	de all financial		
	■ No □ Yes	s. Fill in the details below.						
	Name Addres (Number,	S Street, City, State and ZIP Code)	Date Issued					

Case: 17-10488-BAH Doc #: 1 Filed: 04/04/17 Desc: Main Document Page 14 of 55 Debtor 1 Dawn H. Nelson Case number (if known) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Dawn H. Nelson Signature of Debtor 2 Dawn H. Nelson Signature of Debtor 1 Date April 4, 2017 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person \_\_\_\_\_. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

■ No

Cas	е. 17-10466-БАП	DOC#. 1 Filed.	04/04/17 Desc. Main Document	Page 15 01 55
Fill in this infor	mation to identify your c	ase and this filing:		
Debtor 1	Dawn H. Nelson			
<b>D</b> 14 0	First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF NEW HAM	MPSHIRE	
Casa numbar	_			
Case number _				☐ Check if this is an amended filing
Official Fo	orm 106A/B			
_	le A/B: Prope	ertv		12/15
			nce. If an asset fits in more than one category, list th	
hink it fits best. E	Be as complete and accurate	e as possible. If two marrie	d people are filing together, both are equally respons  n. On the top of any additional pages, write your nam	ible for supplying correct
Answer every ques		separate sneet to this form	ii. On the top of any additional pages, write your nam	e and case number (ii known).
Part 1: Describe	Each Residence, Building,	Land, or Other Real Estate	You Own or Have an Interest In	
Do you own or	have any legal or equitable	interest in any residence h	ouilding, land, or similar property?	
	nave any legal of equitable	interest in any residence, b	ounding, land, or similar property:	
No. Go to Pa	rt 2.			
☐ Yes. Where i	is the property?			
Part 2: Describe	Your Vehicles			
B. Cars, vans, tr	rucks, tractors, sport util	ity vehicles, motorcycle	es	
□ Yes				
			nal vehicles, other vehicles, and accessories isels, snowmobiles, motorcycle accessories	
■ No				
☐ Yes				
5 Add the doll:	ar value of the portion vo	ou own for all of your en	ntries from Part 2, including any entries for	
			=>	\$0.00
	Your Personal and Housel have any legal or equital		a following itams?	Current value of the
Do you own or	nave any legal or equital	ble interest in any of the	e following items :	portion you own?  Do not deduct secured claims or exemptions.
	oods and furnishings ajor appliances, furniture,	linens, china, kitchenware	е	·
Yes. Desc	cribe			
	Household	Goods and Furnishi	nas	\$3,500.00

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

☐ No

Yes. Describe.....

Debtor 1	Dawn H. Nelson	Case number (if known)	
	Cell phone and 3 televisions		\$200.00
	ctibles of value  ples: Antiques and figurines; paintings, prints, or other artwork; books other collections, memorabilia, collectibles	s, pictures, or other art objects; stamp, coin,	or baseball card collections;
`	s. Describe		
Exam	ment for sports and hobbies  ples: Sports, photographic, exercise, and other hobby equipment; bid musical instruments	cycles, pool tables, golf clubs, skis; canoes a	and kayaks; carpentry tools;
■ No □ Ye	s. Describe		
10. <b>Firea</b> Exai ■ No	mples: Pistols, rifles, shotguns, ammunition, and related equipment		
☐ Ye	s. Describe		
11. <b>Cloth</b> <i>Exal</i> □ No	mples: Everyday clothes, furs, leather coats, designer wear, shoes, a	ccessories	
■ Ye	s. Describe		
	Wearing Apparel		\$300.00
☐ No	mples: Everyday jewelry, costume jewelry, engagement rings, weddir	ng rings, heirloom jewelry, watches, gems, g	old, silver
	Misc. jewelry		\$500.00
Exal ■ No	farm animals mples: Dogs, cats, birds, horses s. Describe		
	other personal and household items you did not already list, inc	luding any health aids you did not list	
■ No □ Ye	s. Give specific information		
	d the dollar value of all of your entries from Part 3, including any Part 3. Write that number here		\$4,500.00
Part 4:	Describe Your Financial Assets		
Do you	own or have any legal or equitable interest in any of the followin	g?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16. <b>Cash</b> <i>Exa</i> i	mples: Money you have in your wallet, in your home, in a safe deposi	it box, and on hand when you file your petition	on

☐ Yes.....

Case: 17-10488-BAH Doc #: 1 Filed: 04/04/17 Desc: Main Document Page 17 of 55 Debtor 1 Case number (if known) Dawn H. Nelson 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Yes..... Service Credit Union in Derry NH, checking 17.1. Checking account \$140.00 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. No ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Institution name or individual: ☐ Yes. ..... 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit □ No Yes. Give specific information about them... 50% beneficiary and Trustee of the Robert E. Richardson Revocable Trust of May 15, 1998. The principal interest of the trust consists of real estate located at 32 Berry Street in Derry New

50% beneficiary and Trustee of the Robert E. Richardson Revocable Trust of May 15, 1998. The principal interest of the trust consists of real estate located at 32 Berry Street in Derry New Hampshire. Fair market value is \$239,000.00 with an outstanding debt of approximately \$174,378.00. Nationstar Mortgage LLC as servicer for Federal Home Loan Mortgage Corporation (Holder). This mortgage is currently in foreclosure and scheduled for auction on April 5, 2017.

\$119,500.00

Debtor 1 Case number (if known) Dawn H. Nelson 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No ☐ Yes. Give specific information about them... Current value of the Money or property owed to you? portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance □ No Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: **American Income Life Insurance** Company. Insured Whole Life Insurance. Opened on 10/14/16 and **Kavla Nelson** \$0.00 has accumulated no cash value. 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information...

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Official Form 106A/B Schedule A/B: Property page 4

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Deb	otor 1 Dawn H. Nelson		Case number (if known)	
36.	Add the dollar value of all of your entries from Part 4, includir for Part 4. Write that number here			\$119,640.00
Part	5: Describe Any Business-Related Property You Own or Have an Inter	rest In. List any real esta	ate in Part 1.	
37. <b>[</b>	Oo you own or have any legal or equitable interest in any business-relat	ted property?		
	No. Go to Part 6.			
	Yes. Go to line 38.			
Part	6: Describe Any Farm- and Commercial Fishing-Related Property You lf you own or have an interest in farmland, list it in Part 1.	u Own or Have an Interes	st In.	
46.	 Do you own or have any legal or equitable interest in any farm-	- or commercial fishir	ng-related property?	
	■ No. Go to Part 7.			
	☐ Yes. Go to line 47.			
Part	7: Describe All Property You Own or Have an Interest in That You	u Did Not List Above		
53.	Do you have other property of any kind you did not already list	?		
	Examples: Season tickets, country club membership  No			
	Yes. Give specific information			
54.	Add the dollar value of all of your entries from Part 7. Write th	nat number here		\$0.00
Part	8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$0.00
56.	Part 2: Total vehicles, line 5	\$0.00	_	·
57.	Part 3: Total personal and household items, line 15	\$4,500.00		
58.	Part 4: Total financial assets, line 36	\$119,640.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$124,140.00	Copy personal property total	\$124,140.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$124,140.00

Official Form 106A/B Schedule A/B: Property page 5

Fill in this infor				
Debtor 1	Dawn H. Nelson			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF NEW HA	MPSHIRE	
Case number				
(if known)				☐ Check if this is an amended filing

#### Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Proper	y You Claim as Exempt
-----------------------------	-----------------------

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption	
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
Household Goods and Furnishings Line from Schedule A/B: 6.1	\$3,500.00		\$3,500.00	N.H. Rev. Stat. Ann. § 511:2(III)	
Ellie Holli Gollodale 775. GTT			100% of fair market value, up to any applicable statutory limit	311.2(m)	
Cell phone and 3 televisions Line from Schedule A/B: 7.1	\$200.00		\$200.00	N.H. Rev. Stat. Ann. § 511:2(XVIII)	
Line nom schedule A/B. 1.1			100% of fair market value, up to any applicable statutory limit	311.2(XVIII)	
Wearing Apparel Line from Schedule A/B: 11.1	\$300.00		\$300.00	N.H. Rev. Stat. Ann. § 511:2(I)	
Line Horr Schedule A/B. 1111			100% of fair market value, up to any applicable statutory limit		
Misc. jewelry Line from Schedule A/B: 12.1	\$500.00		\$500.00	N.H. Rev. Stat. Ann. § 511:2(XVII)	
Line Horr Schedule AVD. 12.1			100% of fair market value, up to any applicable statutory limit	311.2(XVII)	
Checking: Service Credit Union in Derry NH, checking account	\$140.00		\$140.00	N.H. Rev. Stat. Ann. § 511:2(XVIII)	
Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	311.2(AVIII)	

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Debtor 1	Dawn H. Nelson		Case number (if known)				
	f description of the property and line on edule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim Specific la		Specific laws that allow exemption		
		Copy the value from Check only one box for each exemption. Schedule A/B					
	6 beneficiary and Trustee of the pert E. Richardson Revocable	\$119,500.00		\$32,311.00	N.H. Rev. Stat. Ann. § 480:1		
Tru inte esta Der valu out	st of May 15, 1998. The principal erest of the trust consists of real ate located at 32 Berry Street in ry New Hampshire. Fair market ue is \$239,000.00 with an standing de from Schedule A/B: 25.1			100% of fair market value, up to any applicable statutory limit			
	you claiming a homestead exemption object to adjustment on 4/01/19 and every solved No  Yes. Did you acquire the property covered No  Yes	3 years after that for cas	ses fi	·	,		

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mount of claim Vo not deduct the	amend olying correct informa pages, write your na	Column C Unsecured portion
responsible for suppl top of any additional ave nothing else to recolumn A	amend	12/15  tion. If more space me and case  Column C Unsecured portion
responsible for suppl top of any additional ave nothing else to recolumn A	amend	12/15  tion. If more space me and case  Column C Unsecured portion
responsible for suppl top of any additional ave nothing else to recolumn A	amend	12/15  tion. If more space me and case  Column C Unsecured portion
responsible for suppl top of any additional ave nothing else to recolumn A	amend	12/15 tion. If more space me and case  Column C Unsecured portion
responsible for suppl top of any additional ave nothing else to recolumn A	amend	12/15  tion. If more space me and case  Column C Unsecured portion
responsible for suppl top of any additional ave nothing else to recolumn A	amend	12/15  tion. If more space me and case  Column C Unsecured portion
responsible for suppl top of any additional ave nothing else to recolumn A	eport on this form.  Column B  Value of collateral that supports this	tion. If more space me and case  Column C  Unsecured portion
ave nothing else to recolumn A Column on to claim Volume to to the control of the	eport on this form.  Column B  Value of collateral that supports this	Column C Unsecured portion
Column A Commount of claim Vo not deduct the	Column B Value of collateral that supports this	Unsecured portion
Column A Commount of claim Vo not deduct the	Column B Value of collateral that supports this	Unsecured portion
mount of claim Vo not deduct the	Value of collateral	Unsecured portion
mount of claim Vo not deduct the	Value of collateral	Unsecured portion
mount of claim Vo not deduct the	Value of collateral	Unsecured portion
o not deduct the	hat supports this	portion
		If any
\$174,378.00	\$239,000.00	\$0.00
t of the trust cons ew Hampshire. F ebt of approximat ervicer for Feder nortgage is curre	sists of real Fair market tely ral Home	
1	E. Richardson Ret of the trust con the trust conew Hampshire. Febt of approximatervicer for Federortgage is curred pril 5, 2017.	E. Richardson Revocable t of the trust consists of real ew Hampshire. Fair market ebt of approximately servicer for Federal Home mortgage is currently in April 5, 2017.

#### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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Debt	ebtor 1 Dawn H. Nelson			Case number (if know)		
	First Name	Middle Name	Last Name			
	Name, Number, Stree Korde & Associa 900 Chelmsford Suite 3102 Lowell, MA 0185	Street		On which line in Part 1 did you enter the creditor? 2.1  Last 4 digits of account number 4426		
	Name, Number, Stree Nationstar Morto PO Box 650783 Dallas, TX 75265			On which line in Part 1 did you enter the creditor?		
	Name, Number, Stree Nationstar Mortg 8950 Cypress W Coppell, TX 750	aters Blvd.		On which line in Part 1 did you enter the creditor?		

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	Odde: 17 10400 D/ 11	1 200 11: 1	110a. 04/04/11 De	oo. Main Boodine	1
Fill in th	is information to identify your	case:			
Debtor 1	Dawn H. Nelson				
Dobtor .	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if,	filing) First Name	Middle Name	Last Name		
United S	tates Bankruptcy Court for the:	DISTRICT OF NE	W HAMPSHIRE		
Case nu	mhar				
(if known)					☐ Check if this is an
					amended filing
O	LE 400E/E				
	I Form 106E/F				4044=
	dule E/F: Creditors W				12/15 PRIORITY claims. List the other party to
Schedule Schedule left. Attacl name and	G: Executory Contracts and Unexp D: Creditors Who Have Claims Sec h the Continuation Page to this pag case number (if known).	oired Leases (Official cured by Property. If n ge. If you have no info	Form 106G). Do not include nore space is needed, copy	any creditors with partially se the Part you need, fill it out, n	roperty (Official Form 106A/B) and on ecured claims that are listed in number the entries in the boxes on the op of any additional pages, write your
Part 1:	List All of Your PRIORITY Ur		2		
_	o. Go to Part 2.	d ciaims against you	ſ		
☐ Yo		V Unaccured Clair			
	List All of Your NONPRIORIT				
_	ny creditors have nonpriority unsec	_			
LI N	<ul> <li>You have nothing to report in this p</li> </ul>	eart. Submit this form to	the court with your other sche	edules.	
■ Ye	es.				
unse	one creditor holds a particular claim, l	y for each claim. For ea	ach claim listed, identify what t	ype of claim it is. Do not list claim	ims already included in Part 1. If more
					Total claim
4.1	Advantage Assets II, Inc.	Last	4 digits of account number	0406	\$710.00
	Nonpriority Creditor's Name	\A/b a=	was the debt incurred?	2004	
7	c/o LTD Financial Services 7322 Southwest Freeway, S 1600		i was the debt incurred?		
	Houston, TX 77074-2053				
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of	the date you file, the claim i	s: Check all that apply	
	_	_			
_	Debtor 1 only		ontingent		
_	Debtor 2 only		nliquidated		
	Debtor 1 and Debtor 2 only		sputed	d alaim.	
	At least one of the debtors and an		of NONPRIORITY unsecured	ı cıaım:	
	☐ Check if this claim is for a comi	illullity	udent loans	ration agreement and live of	st vou did not
	s the claim subject to offset?		oligations arising out of a sepa t as priority claims	ration agreement or divorce tha	at you did not
I	No		· ·	g plans, and other similar debts	<b>3</b>
ı	☐ Yes		ther. Specify Credit card	purchases	
		<b>-</b> 0	iller. Specify S. Sait Said	F	

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Debto	Dawn H. Nelson		Case number (if know)				
4.2	Amex Nonpriority Creditor's Name	Last 4 digits of account number	6222	\$1.00			
	Correspondence Po Box 981540 El Paso, TX 79998	When was the debt incurred?	Opened 2/06/97 Last Active 06/07				
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply				
	Who incurred the debt? Check one.						
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecure	d alaim.				
	At least one of the debtors and another	Student loans	u ciaiii.				
	☐ Check if this claim is for a community debt  Is the claim subject to offset?		aration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharir	ng plans, and other similar debts				
	☐ Yes	■ Other. Specify Credit Card	I				
4.3	CAC Financial Corp	Last 4 digits of account number	6812	\$111.00			
	Nonpriority Creditor's Name 2601 Nw Expressway Ste 1000 E	When was the debt incurred?	Opened 7/08/16				
	Oklahoma City, OK 73112  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	$\square$ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	Debts to pension or profit-sharing plans, and other similar debts					
	□Yes	Other. Specify Pps Parkla	nd Pulmonary Medical				
4.4	Citibank/The Home Depot Nonpriority Creditor's Name	Last 4 digits of account number	5125	\$572.00			
	Citicorp Cr Srvs/Centralized Bankruptcy Po Box 790040	When was the debt incurred?	Opened 4/23/14 Last Active 11/14/16				
	S Louis, MO 63129  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	Debtor 1 only	☐ Contingent	☐ Contingent				
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only						
	$\square$ At least one of the debtors and another	d claim:					
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not				
	No	Debts to pension or profit-sharir	ng plans, and other similar debts				
	☐ Yes	■ Other. Specify Charge Ac					
	<b>□</b> 162	Other. Specify					

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Debtor 1 Dawn H. Nelson		Case number (if know)				
4.5	Continental Credit Ctr Nonpriority Creditor's Name	Last 4 digits of account number	0119	\$45.00		
	Po Box 30348	When was the debt incurred?	Opened 01/15			
	Santa Barbara, CA 93103  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply			
	_	П				
	Debtor 1 only	<b>o</b>	☐ Contingent			
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	Disputed	I alaim.			
	At least one of the debtors and another	Type of NONPRIORITY unsecured  ☐ Student loans	i ciaim:			
☐ Check if this claim is for a community debt  Is the claim subject to offset?			ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts			
	□ Yes		Attorney New England Molecular			
4.6	Continental Credit Ctr	Last 4 digits of account number	0120	\$33.00		
	Nonpriority Creditor's Name Po Box 30348 Santa Barbara, CA 93103	When was the debt incurred?	Opened 01/15			
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply			
	Who incurred the debt? Check one.					
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:			
	☐ Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims				
	No	Debts to pension or profit-sharin	g plans, and other similar debts			
	Yes	■ Other. Specify Imaging				
4.7	Credit Bureau Assoc Ne Nonpriority Creditor's Name	Last 4 digits of account number	9178	\$18.00		
	30 Mass. Ave North Andover, MA 01845	When was the debt incurred?	Opened 11/16			
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply			
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts			
	Yes	Other. Specify Collection	Attorney Rockingham Radiology			

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Debtor	Dawn H. Nelson		Case number (if know)			
4.8	Credit Bureau Assoc Ne Nonpriority Creditor's Name	Last 4 digits of account number	9177	\$2.00		
	30 Mass. Ave North Andover, MA 01845	When was the debt incurred?	Opened 11/16			
	Number Street City State ZIp Code	As of the date you file, the claim	is: Check all that apply			
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a community debt	☐ Student loans				
	Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts			
	☐ Yes	Other. Specify Collection	Attorney Rockingham Radiology			
4.9	Discover Financial	Last 4 digits of account number	7694	\$3,890.00		
	Nonpriority Creditor's Name	_		. ,		
	Po Box 3025 New Albany, OH 43054	When was the debt incurred?	Opened 12/14 Last Active 3/01/17			
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	lly				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts			
	Yes	Other. Specify Credit Card	<u></u>			
4.1	Elliot Hospital	Last 4 digits of account number	0757	\$114.40		
Ū	Nonpriority Creditor's Name c/o CBCS	When was the debt incurred?	2014			
	PO Box 2724 Columbus, OH 43216-2724 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply			
	Who incurred the debt? Check one.					
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts			
	Yes	Other. Specify medical bil	ls			

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Debto	Dawn H. Nelson	Case number (if know)				
4.1	Elliot Professional Services	Last 4 digits of account number	4923	\$126.00		
	Nonpriority Creditor's Name c/o CBCS PO Box 2724		2014			
	Columbus, OH 43216-2724  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply			
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not			
	No	Debts to pension or profit-sharin				
	Yes	Other. Specify Medical Bil	<u>ls</u>			
4.1	General Electric Capital  Nonpriority Creditor's Name	Last 4 digits of account number	9936	\$11,255.00		
	c/o FNCB INC. PO Box 51660	When was the debt incurred?	2005			
	Sparks, NV 89435 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply			
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	□ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	Other. Specify Credit card	purchases			
4.1	Kohls/Capital One Nonpriority Creditor's Name	Last 4 digits of account number	3827	\$1.00		
	Kohls Credit Po Box 3043 Milwaukee, WI 53201	When was the debt incurred?	Opened 04/02 Last Active 1/16/05			
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply			
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims				
	■ No	☐ Debts to pension or profit-sharin				
	Yes	Other. Specify Charge Acc	count			

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Debtor 1 Dawn H. Nelson		Case number (if know)				
4.1	LVNV Funding LLC	Last 4 digits of account number 5031	\$4,981.00			
	Nonpriority Creditor's Name c/o FNCB INC. PO Box 51660	When was the debt incurred? 2006				
	Sparks, NV 89435  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	Debts to pension or profit-sharing plans, and other similar debts				
	Yes	■ Other. Specify				
4.1 5	Parkland Medical Center	Last 4 digits of account number 9333	\$1,288.00			
	Nonpriority Creditor's Name PO Box 740760 Cincinnati, OH 45274-0760	When was the debt incurred? 2016				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	■ Other. Specify Medical Bills				
4.1 6	Parkland Medical Center	Last 4 digits of account number 9333	\$241.00			
	Nonpriority Creditor's Name PO Box 740760 Cincinnati, OH 45274-0760	When was the debt incurred? 5/2016				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	■ Other. Specify Medical Bills				

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Debtor 1 Dawn H. Nelson			Case number (if know)	
4.1 7	Rockingham Radiology	Last 4 digits of account number	9178	\$19.00
	Nonpriority Creditor's Name c/o Credit Bureau Associates Northeast 30 Massachusetts Avenue, Suite 4 North Andover, MA 01845-3458	When was the debt incurred?	2016	
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	<u> </u>			
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed	Labelia	
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt  Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	■ Other. Specify Medical Bil	ls	
4.1 8	Rockingham Radiology	Last 4 digits of account number	9177	\$2.00
	Nonpriority Creditor's Name c/o Credit Bureau Associates Northeast 30 Massachusetts Avenue, Suite 4 North Andover, MA 01845-3458	When was the debt incurred?	2016	
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa		
	Is the claim subject to offset?	report as priority claims		
	No	☐ Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Medical Bil	<u>ls</u>	
4.1 9	Southwest Credit Systems  Nonpriority Creditor's Name	Last 4 digits of account number	8933	\$392.00
	4120 International Parkway Ste 1100	When was the debt incurred?	Opened 9/16/13	
	Carrollton, TX 75007  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	□Yes	■ Other. Specify Collection	Attorney Comcast	
		· · ·	<del></del>	

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Debtor	Dawn H. Nelson		Case number (if know)					
4.2			0.405	<b>^</b> 4				
0	The New England Heart Institute	Last 4 digits of account number	0425	\$19.00				
	Nonpriority Creditor's Name c/o Benuck & Rainey, Inc. 25 Concord Road	When was the debt incurred?	2016					
	Lee, NH 03861		tra OL - L - III di - L					
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply					
	_	_						
	_ ′	Contingent						
	Debtor 2 only	Unliquidated						
	Debtor 1 and Debtor 2 only	Disputed						
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not					
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts					
	Yes	ls						
4.2	The New England Heart Institute	Last 4 digits of account number	0424	\$16.00				
1	Nonpriority Creditor's Name			Ψ10.00				
	c/o Benuck & Rainey, Inc. 25 Concord Road	When was the debt incurred?	2016					
	Lee, NH 03861							
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply					
	_							
	Debtor 1 only	☐ Contingent						
	Debtor 2 only	Unliquidated						
	Debtor 1 and Debtor 2 only	Disputed						
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not					
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts					
	Yes	Other. Specify Medical Bil	ls					
4.2	Town of Derry Ambulance	Last 4 digits of account number	0471	\$90.00				
2	Nonpriority Creditor's Name  14 Manning Street	When was the debt incurred?	4/2016	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
	Derry, NH 03038-3201							
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply					
	Debtor 1 only	☐ Contingent						
	Debtor 2 only							
	Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	d claim:						
	☐ Check if this claim is for a community	☐ Student loans						
	debt		ration agreement or divorce that you did not					
	Is the claim subject to offset?	report as priority claims						
	No	☐ Debts to pension or profit-sharin						
	☐ Yes ☐ Other. Specify Medical Bills							

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Dawn H. Nelson		Case number (if know)				
Town of Derry Ambulance	Last 4 digits of account number	0429	\$90.00			
Nonpriority Creditor's Name  14 Manning Street	When was the debt incurred?	3/2016	*****			
Derry, NH 03038-3201 Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply				
Who incurred the debt? Check one.	•					
■ Debtor 1 only	☐ Contingent					
Debtor 2 only	☐ Unliquidated					
☐ Debtor 1 and Debtor 2 only	☐ Disputed					
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
☐ Check if this claim is for a community	☐ Student loans					
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not				
■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
Yes	■ Other. Specify Medical Bil	ls				
Town of Derry Ambulance		0435	\$135.0			
Nonpriority Creditor's Name	Last 4 digits of account number		φ133.0			
14 Manning Street Derry, NH 03038-3201	When was the debt incurred?	3/2016				
Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply				
Who incurred the debt? Check one.						
Debtor 1 only	☐ Contingent					
Debtor 2 only	☐ Unliquidated					
☐ Debtor 1 and Debtor 2 only	☐ Disputed					
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
☐ Check if this claim is for a community	Student loans					
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	Obligations arising out of a separation agreement or divorce that you did not				
No	Debts to pension or profit-sharin	o plans, and other similar dehts				
□ Yes	Other. Specify Medical Bills					
	· /					
Transworld Systems Inc.	Last 4 digits of account number	3675	\$305.0			
Nonpriority Creditor's Name	When was the debt incurred?					
PO Box 15609 Wilmington, DE 19850-5609	When was the debt incurred?	<del>2005</del>				
Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply				
Who incurred the debt? Check one.						
Debtor 1 only	☐ Contingent					
☐ Debtor 2 only	☐ Unliquidated					
☐ Debtor 1 and Debtor 2 only	☐ Disputed					
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
☐ Check if this claim is for a community	☐ Student loans					
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
□Yes	Other. Specify consumer	deht				

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Debto	Dawn H. Nelson		Case number (if know)	
4.2 6	West Asset Management	Last 4 digits of account number	7936	\$1.00
	Nonpriority Creditor's Name  2703 N Highway 75  Sherman, TX 75090	When was the debt incurred?	Opened 04/12 Last Active 2/22/13	
Number Street City State Zlp Code  Who incurred the debt? Check one.		As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepreport as priority claims	paration agreement or divorce that you did not	
	■ No	Debts to pension or profit-shar	ing plans, and other similar debts	
	☐ Yes		Attorney Parkland Medical	
Part 3	List Others to Be Notified About a De	ebt That You Already Listed		
is try have	this page only if you have others to be notified ying to collect from you for a debt you owe to s more than one creditor for any of the debts th ied for any debts in Parts 1 or 2, do not fill out	someone else, list the original creditor i at you listed in Parts 1 or 2, list the add	in Parts 1 or 2, then list the collection agency	y here. Similarly, if you
	and Address	On which entry in Part 1 or Part 2 did yo	_	
Ame	<del>-</del>		Part 1: Creditors with Priority Unsecured Clai	
	ox 297871 Lauderdale, FL 33329		Part 2: Creditors with Nonpriority Unsecured	Claims
. 0		Last 4 digits of account number		
Name :	and Address	On which entry in Part 1 or Part 2 did yo	u list the original creditor?	
	Financial Corp	· · · · · · · · · · · · · · · · · · ·	☐ Part 1: Creditors with Priority Unsecured Clai	ms
	Nw Expwy		Part 2: Creditors with Nonpriority Unsecured	
Oklal	homa City, OK 73112	Last 4 digits of account number	, , , , , , , , , , , , , , , , , , , ,	
Name	and Address	On which entry in Part 1 or Part 2 did yo	u list the original creditor?	
	ank/The Home Depot	Line 4.4 of (Check one):	Part 1: Creditors with Priority Unsecured Clai	ms
	ox 6497	I	Part 2: Creditors with Nonpriority Unsecured	Claims
Sioux	x Falls, SD 57117	Last 4 digits of account number		
	and Address inental Credit Ctr	On which entry in Part 1 or Part 2 did yo Line <b>4.5</b> of ( <i>Check one</i> ):	u list the original creditor? $\beth$ Part 1: Creditors with Priority Unsecured Clai	ima
	Milpas St Ste C		Part 2: Creditors with Nonpriority Unsecured	
Santa	a Barbara, CA 93103		Part 2: Creditors with Nonphority Onsecured	Claims
		Last 4 digits of account number		
Name	and Address	On which entry in Part 1 or Part 2 did yo	u list the original creditor?	
	inental Credit Ctr	Line <u>4.6</u> of ( <i>Check one</i> ):	☐ Part 1: Creditors with Priority Unsecured Clai	ms
	Milpas St Ste C a Barbara, CA 93103	I	Part 2: Creditors with Nonpriority Unsecured	Claims
Santa	a Baibaia, CA 93103	Last 4 digits of account number		
Name :	and Address	On which entry in Part 1 or Part 2 did yo	u list the original creditor?	
	over Financial		☐ Part 1: Creditors with Priority Unsecured Clai	ims
	ox 15316	ı	Part 2: Creditors with Nonpriority Unsecured	Claims
Wilm	ington, DE 19850	Last 4 digits of account number	, . ,	
Name	and Address	On which entry in Part 1 or Part 2 did yo	u list the original creditor?	
Kohls	s/Capital One		☐ Part 1: Creditors with Priority Unsecured Clai	ims
	W 17000 Ridgewood Dr		Part 2: Creditors with Nonpriority Unsecured	Claims
wenc	omonee Falls, WI 53051	Last 4 digits of account number		

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Debtor 1 Dawn H. Nelson		Case number (if know)
Name and Address Southwest Credit Systems 4120 International Pkwy Carrollton, TX 75007	On which entry in Part 1 or Part 2 Line 4.19 of (Check one):	2 did you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
ourion, ix root	Last 4 digits of account number	

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	<b>Other.</b> Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
	6f.	Student loans	6f.	Total Claim
Total	OI.	Student loans	OI.	\$ 0.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 24,457.40
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 24,457.40

#### Case: 17-10488-BAH Doc #: 1 Filed: 04/04/17 Desc: Main Document Page 35 of 55

Fill in this information to identify your case:					
Debtor 1	Dawn H. Nelson				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	nkruptcy Court for the:	DISTRICT OF NEW HA	MPSHIRE		
Case number _					☐ Check if this is an amended filing
					amended illing

## Official Form 106G

## **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r company with Name, Numbe	whom you have the r, Street, City, State and ZIP (	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			
	City		State	ZIP Code	<del>_</del>
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	<del>_</del>
2.3	City		State	Zii Code	
	Name				
	Number	Street			
	City		State	ZIP Code	<del>_</del>
2.4					
	Name				_
	Number	Street			
	City		State	ZIP Code	<u> </u>
2.5	,				
	Name				_
	Number	Street			
	City		State	ZIP Code	<del>_</del>
					·

## Case: 17-10488-BAH Doc #: 1 Filed: 04/04/17 Desc: Main Document Page 36 of 55

Fill in this i	nformation to identify your	case:			
Debtor 1	Dawn H. Nelson	A			
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if, filing)	) First Name	Middle Name	Last Name		
United State	es Bankruptcy Court for the:	DISTRICT OF NEW HA	MPSHIRE		
Case number	ar				
(if known)					☐ Check if this is an
					amended filing
Official	Form 10011				
	Form 106H				
Schedu	ule H: Your Cod	ebtors			12/15
■ No □ Yes  2. Withi Arizona	in the last 8 years, have you, California, Idaho, Louisiana, Go to line 3.  Did your spouse, former spou	ı <b>lived in a community pr</b> Nevada, New Mexico, Pu	operty state or territor erto Rico, Texas, Wash	· <b>y?</b> (Community property	√ states and territories include
in line 2 Form 10 out Col	2 again as a codebtor only i 06D), Schedule E/F (Official umn 2.	f that person is a guaran	tor or cosigner. Make	sure you have listed the 16G). Use Schedule D,	g with you. List the person shown he creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
_	olumn 1: Your codebtor ame, Number, Street, City, State and Zl	P Code		Check all schedule	editor to whom you owe the debt as that apply:
2.4				Och data D. C	_
3.1 Na	ame			_ ☐ Schedule D, line ☐ Schedule E/F, line	
				☐ Schedule C, line	
NI.	Chroat				
	umber Street ity	State	ZIP Code		
3.2				☐ Schedule D, line	Э
	ame			□ Schedule E/F, li	
				☐ Schedule G, line	
Nu	umber Street			_	
Ci	ity	State	ZIP Code		

Fill	in this information to identify your c	ase:								
De	btor 1 Dawn H. Ne	Ison								
1 -	btor 2 puse, if filing)				_					
Un	ited States Bankruptcy Court for the	: DISTRICT OF NEW I	HAMPSHIRE							
	se number		_			Check	if this is:			
(If k	nown)						amende			
									ving postpetition of following date	
0	fficial Form 106I					MM	// DD/ Y	YYY		
S	chedule I: Your Inc	ome								12/15
spo	plying correct information. If you use. If you are separated and you ch a separate sheet to this form.  The describe Employment	ır spouse is not filing w	ith you, do not inclu	ıde infor	mati	on about y	our spo	ouse. If	more space is	needed,
1.	Fill in your employment information.		Debtor 1			ı	Debtor 2	or non	-filing spouse	
	If you have more than one job,	Empleyment status	☐ Employed	☐ Employed			☐ Employed			
	attach a separate page with information about additional employers.	Employment status	■ Not employed			I	□ Not e	mployed	d	
	Include part-time, seasonal, or	Occupation								
	self-employed work.	Employer's name								
	Occupation may include student or homemaker, if it applies.	Employer's address								
		How long employed t	here?				_			
Pa	rt 2: Give Details About Mor	nthly Income								
	imate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to r	eport for	any	line, write \$	\$0 in the	space.	Include your no	on-filing
	ou or your non-filing spouse have mo e space, attach a separate sheet to		ombine the informatio	on for all e	emplo	oyers for th	nat perso	n on the	e lines below. If	you need
						For Debt	or 1		Debtor 2 or filing spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$		0.00	\$	N/A	_
3.	Estimate and list monthly overt	ime pay.		3.	+\$		0.00	+\$	N/A	_
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$	C	0.00	\$	N/A	

Deb	tor 1	Dawn H. Nelson	_	Case	number (if known)			
					Debtor 1	non-f	Debtor 2 or Filing spouse	
	Cop	y line 4 here	4.	\$	0.00	\$	N/A	
5.	List	all payroll deductions:						
	5a. 5b.	Tax, Medicare, and Social Security deductions  Mandatory contributions for retirement plans	5a. 5b.	\$ \$	0.00	\$	N/A N/A	
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	N/A	
	5d. 5e.	Required repayments of retirement fund loans Insurance	5d. 5e.	\$ \$	100.00	\$	N/A N/A	
	5f.	Domestic support obligations	5f.	\$	0.00	\$	N/A	
	5g.	Union dues	5g.	\$_	0.00	\$	N/A	
	5h.	Other deductions. Specify:	5h.+	\$		+ \$	N/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	100.00	\$	N/A	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	-100.00	\$	N/A	
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	N/A	
	8b.	Interest and dividends	8b.	\$	0.00	\$	N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	N/A	
	8d.	Unemployment compensation	8d.	\$_	0.00	\$	N/A	
	8e.	Social Security	8e.	\$	610.00	\$	N/A	
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify: Social Security Disability Pension or retirement income	8f. 8g.	\$ \$	143.00 0.00	\$ 	N/A N/A	
	8h.	Other monthly income. Specify: Boyfriends contribution	8h.+	\$	1,200.00	+ \$	N/A	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	1,953.00	\$	N/A	
10.	Cal	culate monthly income. Add line 7 + line 9.	10. \$		1,853.00 + \$		N/A = \$	1,853.00
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.			,			,
11.	Incli othe	e all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your r friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify:	depen	•	•	•	chedule J. 11. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certailies					12. \$	1,853.00 ed
40	D-	rou ovnost on incresses or decrease within the constitution the constitution of	2					income
13.	□ □	vou expect an increase or decrease within the year after you file this form  No.  Yes. Explain: Debtor lives with her 25 year old daughter and a		ate in	the house or	Berry	Street in Der	rv NH

	in this information	a ta blantifana				l		
FIII	in this information	n to identity yo	ur case:					
Deb	otor 1	Dawn H. Nels	son			Ch	eck if this is:	
D-1							An amended filing	•
	otor 2 ouse, if filing)							owing postpetition chapter of the following date:
(	,g,							
Unit	ed States Bankrup	tcy Court for the:	DISTRI	CT OF NEW HAMPSHIRE	<u> </u>		MM / DD / YYYY	
Cas	e number							
(If k	nown)							
O	fficial For	m 106J						
S	chedule .	J· Your I	Exper	ises				12/15
Ве	as complete an	d accurate as	possible.	If two married people ar				for supplying correct
	ormation. If mor nber (if known)			ch another sheet to this in.	form. On the top of	any addi	tional pages, write	your name and case
Par	t 1: Describ	e Your House	hold					
1.	Is this a joint		iioiu					
	■ No. Go to li	ne 2						
			n a separ	ate household?				
	□No							
		. Debtor 2 mus	t file Offici	al Form 106J-2, Expenses	for Separate House	ehold of De	ebtor 2.	
				, ,	,			
2.	Do you have o	dependents?	■ No					
	Do not list Deb Debtor 2.	tor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state th	e						□ No
	dependents na							□Yes
								□ No
								☐ Yes
								□ No
							_	_ Yes
								□ No
2	Do your expe	naan inaluda	_				_	_
3.	expenses of p		nan	No				
	yourself and y			Yes				
Par	t 2: Estimat	e Your Ongoir	na Monthi	v Evnenses				
Est	imate your expe	enses as of yo	our bankrı	uptcy filing date unless y				napter 13 case to report of the form and fill in the
-	olicable date.		·				·	
				government assistance i				
	value of such a ficial Form 106I		d have inc	cluded it on Schedule I: Y	our Income		Your ex	penses
,0.		•,						
4.				ses for your residence.	nclude first mortgage	Э	•	1,610.00
	payments and	any rent for the	e ground o	r lot.		4.	<b>a</b>	1,010.00
	If not included	d in line 4:						
		ate taxes				4a.	·	0.00
		, homeowner's				4b.	· · · · · · · · · · · · · · · · · · ·	0.00
			•	ıpkeep expenses dominium dues		4c. 4d.	·	0.00
5.				our residence, such as ho	me equity loans	4a. 5.		0.00
		J J	, ,	, - 40 40 110				0.00

Case number (if known)	
6a. \$	550.00
· —	0.00
·	45.00
·	0.00
	480.00
·	0.00
·	0.00
·	
·	0.00
11. \$	0.00
12. \$	0.00
13. \$	0.00
14. \$	0.00
·	
15a. \$	34.00
15b. \$	0.00
15c. \$	0.00
15d. \$	0.00
	3.00
16. \$	0.00
· —	0.00
·	0.00
	0.00
· <u></u> _	0.00
	0.00
1001).	
·	0.00
	0.00
· · · · · · · · · · · · · · · · · · ·	0.00
· —	0.00
·	
	0.00
· ———	0.00
21. +\$	0.00
	2,719.00
)6J-2   \$	
\$	2,719.00
	<del></del> _
23a. \$	1,853.00
·	2,719.00
	2,7 19.00
	000.00
23c. \$	-866.00
ofter you file this form? ect your mortgage payment to increase	se or decrease because o
	6a. \$ 6b. \$ 6c. \$ 6d. \$ 7. \$ 8. \$ 9. \$ 10. \$ 11. \$ 12. \$ 13. \$ 14. \$  15a. \$ 15b. \$ 15c. \$ 15d. \$ 15c. \$ 17d. \$ 17

Fill in this information to identify your case:								
Debtor 1	Dawn H. Nelson							
Debtor 2 (Spouse, if filing)								
United States B	ankruptcy Court for the: District of New Hampshire							
Case number (if known)								

Check	Check as directed in lines 17 and 21:								
1	According to the calculations required by this Statement:								
•	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).								
	Disposable income is determined under 11 U.S.C. § 1325(b)(3).								
	3. The commitment period is 3 years.								
	4. The commitment period is 5 years.								

☐ Check if this is an amended filing

### Official Form 122C-1

# **Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

aaan	nonai pages, write your name and case number (ii r	anownj.						
Part	1: Calculate Your Average Monthly Income							
1.	What is your marital and filing status? Check one of	only.						
	■ Not married. Fill out Column A, lines 2-11.							
	☐ Married. Fill out both Columns A and B, lines 2-11.							
10 th	Il in the average monthly income that you received from all 01(10A). For example, if you are filing on September 15, the 6-ee 6 months, add the income for all 6 months and divide the total ousses own the same rental property, put the income from that	month perional by 6. Fill	od would in the re	be March 1 thro	ugh August 31 de any income	. If the ame amount m	ount of your monthly income varied fore than once. For example, if both	during
					Column A Debtor 1		Column B Debtor 2 or non-filing spouse	
2.	Your gross wages, salary, tips, bonuses, overtime payroll deductions).	, and con	nmissio	ons (before all	\$	0.00	\$	
3.	<b>Alimony and maintenance payments.</b> Do not include Column B is filled in.	e paymen	ts from	a spouse if	\$	0.00	\$	
4.	All amounts from any source which are regularly pof you or your dependents, including child suppor from an unmarried partner, members of your househo and roommates. Include regular contributions from a stilled in. Do not include payments you listed on line 3.	<b>t.</b> Include ld, your d	regular epende	contributions nts, parents,	\$_	0.00	\$	
5.	Net income from operating a business, profession, or farm	Debtor 1	l					
	Gross receipts (before all deductions)	\$	0.00					
	Ordinary and necessary operating expenses	-\$	0.00					
	Net monthly income from a business, profession, or fa	ırm \$	0.00	Copy here ->	\$	0.00	\$	
6.	Net income from rental and other real property	Debtor 1						
	Gross receipts (before all deductions)	\$	0.00					
	Ordinary and necessary operating expenses	<b>-</b> \$	0.00					
	Net monthly income from rental or other real property	\$	0.00	Copy here ->	· \$	0.00	\$	

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

Case number (if known)

					lumn A btor 1		Column B Debtor 2 c non-filing		
7.	Inte	rest, dividends, and royalties		\$_		0.00	\$		
8.	Une	mployment compensation		\$_		0.00	\$		
		not enter the amount if you contend that the amount received was a benef Social Security Act. Instead, list it here:	fit under						
	F	· · · · · · · · · · · · · · · · · · ·	00						
		or your spouse \$							
	bene	sion or retirement income. Do not include any amount received that wa efit under the Social Security Act.		\$_		0.00	\$		
10.	Do r rece dom	ome from all other sources not listed above. Specify the source and an not include any benefits received under the Social Security Act or paymer sived as a victim of a war crime, a crime against humanity, or international pestic terrorism. If necessary, list other sources on a separate page and pulbelow.	nts or						
				\$_		0.00	\$		
				\$_		0.00	\$		
		Total amounts from separate pages, if any.	+	\$_		0.00	\$		
11.		culate your total average monthly income. Add lines 2 through 10 for a column. Then add the total for Column A to the total for Column B.	\$		0.00	+ \$_		= \$	0.00
12.	Сор	Determine How to Measure Your Deductions from Income by your total average monthly income from line 11. culate the marital adjustment. Check one:						\$	y income
10.		You are not married. Fill in 0 below.							
		You are married and your spouse is filing with you. Fill in 0 below.							
		You are married and your spouse is not filing with you.							
	_	Fill in the amount of the income listed in line 11, Column B, that was NO dependents, such as payment of the spouse's tax liability or the spouse's							
		Below, specify the basis for excluding this income and the amount of inc	ome de	voted	l to each	n purpos	e. If necessary	, list addition	al
		adjustments on a separate page.  If this adjustment does not apply, enter 0 below.							
		in this adjustment does not apply, enter o below.	\$						
			\$						
			+\$			_			
		Total	\$		0.0	0 c	opy here=>		0.00
14.	Yo	ur current monthly income. Subtract line 13 from line 12.						\$	0.00
15.	Ca	Iculate your current monthly income for the year. Follow these steps:							
		Conviling 44 hores						\$	0.00
	. 50	Multiply line 15a by 12 (the number of months in a year).						<b>x</b> 12	
		manapy and rod by 12 (and namber of monard area your).						A 12	
	15l	b. The result is your current monthly income for the year for this part of t	he form.					\$	0.00

Dawn H. Nelson

Debtor 1

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Debt	or 1	Dawn H. Nelson		Case number (if known)		
16	. Cal	culate the median family income that applies to y	ou. Follow these step	DS:		
	16a	. Fill in the state in which you live.	NH			
	16b	. Fill in the number of people in your household.	3			
		Fill in the median family income for your state and s			\$	89,188.00
		To find a list of applicable median income amounts	go online using the		Ψ	<u> </u>
17	'. Hov	instructions for this form. This list may also be avail w do the lines compare?	able at the bankrupto	y clerk's office.		
	17a	Line 15b is less than or equal to line 16c. O 11 U.S.C. § 1325(b)(3). Go to Part 3. Do N				
	17b	Line 15b is more than line 16c. On the top of 1325(b)(3). Go to Part 3 and fill out Calcu your current monthly income from line 14 al	lation of Your Dispo			
Par	t 3:	Calculate Your Commitment Period Under 11	J.S.C. § 1325(b)(4)			
18.	Cop	by your total average monthly income from line 1	ı. <u></u>		\$	0.00
19.	conf	duct the marital adjustment if it applies. If you are tend that calculating the commitment period under 1 use's income, copy the amount from line 13.				
	19a	. If the marital adjustment does not apply, fill in 0 on	line 19a.		<b>-</b> \$	0.00
	19b	. Subtract line 19a from line 18.			\$	0.00
00	0-1		E-llandbase stans			
20.		culate your current monthly income for the year.  Copy line 19b			¢	0.00
	20a				Ψ	40
		Multiply by 12 (the number of months in a year).			X	12
	20b	. The result is your current monthly income for the ye	ear for this part of the	form	\$	0.00
	20c	. Copy the median family income for your state and s	size of household from	n line 16c	\$	89,188.00
	04	Have do the lines compare?				
	21.	How do the lines compare?				
		Line 20b is less than line 20c. Unless otherwis period is 3 years. Go to Part 4.	e ordered by the cou	rt, on the top of page 1 of this form, ch	eck box 3, 7	he commitment
		☐ Line 20b is more than or equal to line 20c. Un commitment period is 5 years. Go to Part 4.	ess otherwise ordere	d by the court, on the top of page 1 of	this form, ch	eck box 4, The
Par	t 4:	Sign Below				
	By s	signing here, under penalty of perjury I declare that the	ne information on this	statement and in any attachments is t	rue and corr	ect.
)	<b>(</b> /s/	/ Dawn H. Nelson				
		gwn H. Nelson gnature of Debtor 1				
	•	e April 4, 2017				
		MM / DD / YYYY				
	•	ou checked 17a, do NOT fill out or file Form 122C-2.	- '- (	t that tame a service of the second		Para AA at
	If yo	ou checked 17b, fill out Form 122C-2 and file it with the	nis torm. On line 39 o	t that form, copy your current monthly	income from	iine 14 above.

## Case: 17-10488-BAH Doc #: 1 Filed: 04/04/17 Desc: Main Document Page 44 of 55

Fill	in this information to identify your case:		
	otor 1 Dawn H. Nelson		
DCI	First Name Middle Name Last Name		
	use if, filing)  First Name  Middle Name  Last Name		
Uni	ted States Bankruptcy Court for the: DISTRICT OF NEW HAMPSHIRE		
_	se numberown)	☐ Checl	c if this is an
		amen	ded filing
	ficial Form 106Sum		
	mmary of Your Assets and Liabilities and Certain Statistical Information		12/15
nfo	is complete and accurate as possible. If two married people are filing together, both are equally responsible f rmation. Fill out all of your schedules first; then complete the information on this form. If you are filing amend r original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.		
Par	t 1: Summarize Your Assets		
		Your a	ssets of what you own
1	Schedule A/B: Property (Official Form 106A/B)	Value	what you own
1.	1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	124,140.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	124,140.00
Par	t 2: Summarize Your Liabilities		
			abilities
		Amoun	t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	174,378.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	24,457.40
	Your total liabilities	\$ \$	198,835.40
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	1,853.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,719.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	our other sci	nedules.
	Yes		
7.	What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a personal,	family, or
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check the the court with your other schedules.	s box and s	ubmit this form to

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

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Debtor 1 Dawn H. Nelson Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$\_\_\_\_\_

O. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total cla	ıim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

Fill in this info	rmation to identify your o	ase:			
Debtor 1	Dawn H. Nelson First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	sankruptcy Court for the:	DISTRICT OF NEW HA	AMPSHIRE		
Case number (if known)					☐ Check if this is an amended filing
Official For <b>Declara</b>		n Individua	l Debtor's Sc	hedules	12/15
obtaining mone years, or both.		connection with a ban			ent, concealing property, or or imprisonment for up to 20
Did you pa	ay or agree to pay some	one who is NOT an atto	rney to help you fill out b	ankruptcy forms?	
■ No □ Yes.	Name of person				otcy Petition Preparer's Notice, nd Signature (Official Form 119)
	alty of perjury, I declare t re true and correct.	hat I have read the sun	nmary and schedules file	d with this declaration a	and
Dawn	wn H. Nelson H. Nelson ure of Debtor 1		XSignature of	Debtor 2	
Date	April 4, 2017		Date		

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B2030 (Form 2030) (12/15)

### United States Bankruptcy Court District of New Hampshire

In re	Dawn H. Nelson		Case No.		
111 10		Debtor(s)	Chapter	13	
	DISCLOSURE OF COMPEN	NSATION OF ATTOR	NEY FOR DE	CBTOR(S)	
(	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(compensation paid to me within one year before the filing per rendered on behalf of the debtor(s) in contemplation of	g of the petition in bankruptcy, o	r agreed to be paid	to me, for services re	
	For legal services, I have agreed to accept		\$	2,500.00	
	Prior to the filing of this statement I have received		\$	2,500.00	
	Balance Due			0.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3. ′	The source of compensation to be paid to me is:				
	$\blacksquare$ Debtor $\square$ Other (specify):				
4.	■ I have not agreed to share the above-disclosed compe	ensation with any other person u	nless they are meml	pers and associates of	f my law firm.
	☐ I have agreed to share the above-disclosed compensa copy of the agreement, together with a list of the nan				aw firm. A
5.	In return for the above-disclosed fee, I have agreed to re-	nder legal service for all aspects	of the bankruptcy c	ase, including:	
1	<ul> <li>a. Analysis of the debtor's financial situation, and rende</li> <li>b. Preparation and filing of any petition, schedules, state</li> <li>c. Representation of the debtor at the meeting of credito</li> <li>d. [Other provisions as needed]</li> </ul>	ement of affairs and plan which r	nay be required;	-	ruptcy;
	Negotiations with secured creditors to re reaffirmation agreements and application 522(f)(2)(A) for avoidance of liens on hou	ns as needed; preparation a			
<b>6</b> . ]	By agreement with the debtor(s), the above-disclosed fee Representation of the debtors in any dis any other adversary proceeding.			es, relief from sta	y actions or
		CERTIFICATION			
	I certify that the foregoing is a complete statement of any ankruptcy proceeding.	agreement or arrangement for p	payment to me for re	epresentation of the c	lebtor(s) in
Α	pril 4, 2017	/s/ Christopher J. (	Garner		
$\overline{D}$	ate	Christopher J. Gar			
		Signature of Attorney Garner Law Office			
		7 Auburn Street			
		Nashua, NH 03064			
		603 882-8008 Fax			
		ecf@attorneygarne Name of law firm	er.com		

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

## The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

# Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy\_form

s.html#procedure.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

## Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case: 17-10488-BAH Doc #: 1 Filed: 04/04/17 Desc: Main Document Page 52 of 55

# **United States Bankruptcy Court**District of New Hampshire

In re	Dawn H. Nelson		Case No.	
		Debtor(s)	Chapter	13
	<u>VERIFICATION</u>	ON OF CREDITOR MA	ALING LIS	<u>ST</u>
	The above named debtor hereby certifies pages is complete, correct and consistent nd omissions.	1 1 1 1		-
Date:	April 4, 2017	/s/ Dawn H. Nelsc	on	
		Debtor Signature		
		Dawn H. Nelson		
		Print Name	_	
		Address 32 Ber		
		Derry NH 03038-0		
		Tel. No. 6034794	4792	

Advantage Assets II, Inc. c/o LTD Financial Services 7322 Southwest Freeway, Suite 1600 Houston, TX 77074-2053

Amex Correspondence Po Box 981540 El Paso, TX 79998

Amex Po Box 297871 Fort Lauderdale, FL 33329

CAC Financial Corp 2601 Nw Expressway Ste 1000 E Oklahoma City, OK 73112

CAC Financial Corp 2601 Nw Expwy Oklahoma City, OK 73112

Citibank/The Home Depot Citicorp Cr Srvs/Centralized Bankruptcy Po Box 790040 S Louis, MO 63129

Citibank/The Home Depot Po Box 6497 Sioux Falls, SD 57117

Continental Credit Ctr Po Box 30348 Santa Barbara, CA 93103

Continental Credit Ctr 22 N Milpas St Ste C Santa Barbara, CA 93103

Credit Bureau Assoc Ne 30 Mass. Ave North Andover, MA 01845

Discover Financial Po Box 3025 New Albany, OH 43054

Discover Financial Po Box 15316 Wilmington, DE 19850 Elliot Hospital c/o CBCS PO Box 2724 Columbus, OH 43216-2724

Elliot Professional Services c/o CBCS PO Box 2724 Columbus, OH 43216-2724

Federal Home Loan Mortgage Corp. 8200 Jones Branch Dr. Mc Lean, VA 22102-3110

General Electric Capital c/o FNCB INC. PO Box 51660 Sparks, NV 89435

Kohls/Capital One Kohls Credit Po Box 3043 Milwaukee, WI 53201

Kohls/Capital One N56 W 17000 Ridgewood Dr Menomonee Falls, WI 53051

Korde & Associates PC 900 Chelmsford Street Suite 3102 Lowell, MA 01851

LVNV Funding LLC c/o FNCB INC. PO Box 51660 Sparks, NV 89435

Nationstar Mortgage PO Box 650783 Dallas, TX 75265-0783

Nationstar Mortgage LLC 8950 Cypress Waters Blvd. Coppell, TX 75019

Parkland Medical Center PO Box 740760 Cincinnati, OH 45274-0760

Rockingham Radiology c/o Credit Bureau Associates Northeast 30 Massachusetts Avenue, Suite 4 North Andover, MA 01845-3458 Southwest Credit Systems 4120 International Parkway Ste 1100 Carrollton, TX 75007

Southwest Credit Systems 4120 International Pkwy Carrollton, TX 75007

The New England Heart Institute c/o Benuck & Rainey, Inc. 25 Concord Road Lee, NH 03861

Town of Derry Ambulance 14 Manning Street Derry, NH 03038-3201

Transworld Systems Inc. PO Box 15609 Wilmington, DE 19850-5609

West Asset Management 2703 N Highway 75 Sherman, TX 75090